Filli	n this information to identify your case:		
Deb	Tradital in Fairly		
Deb	First Name Middle Name Last Name		
	se if, filling) First Name Middle Name Last Name		
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI		
Case (if kno	e number 19-50788 wn)	☐ Check	if this is an
		amend	ded filing
Off	icial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information		10/4-
Be as	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ar armadada	g correct les after you file
Part	1: Summarize Your Assets		
		<b>Your as</b> Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,500.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,500.00
Part	2: Summarize Your Liabilities		2,000.00
		Your lia	A HATA
			you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,811.00
	Wannelstad B. 1999		
	Your total liabilities	<b>\$</b>	29,811.00
Part	Summarize Your Income and Expenses		-
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,927.73
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,911.00
Part		· <del></del> _	,
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sch	nedules
_	■ Yes	53,101 001	
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and su	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

#### 19-50788-KMS Dkt 8 Filed 04/29/19 Entered 04/29/19 10:20:21 Page 2 of 33

Deb	otor 1 Trasha M Fairly	Case number <i>(if known)</i>	19-50788	
8.	From the Statement of Your Current Monthly Income: Copy your total current 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	t monthly income from C	fficial Form	\$ 0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this inform	nation to identify you	case and this filings		
Debtor 1		case and this ming.		
Doblor	Trasha M Fairly First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filling)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT (		
Case number	19-50788			_
Odde Hamber	19-30788			☐ Check if this is an amended filing
				•
Official Fo	rm 106A/B			
Schedule	e A/B: Prop	erty		12/15
triink it lits best. Be	e as complete and accur e space is needed, attach	ate as possible. It two marrie	nce. If an asset fits in more than one category, lis d people are filing together, both are equally resp n. On the top of any additional pages, write your r	oncible for aumabulan
Part 1: Describe I	Each Residence, Buildin	g, Land, or Other Real Estate	You Own or Have an Interest In	
1. Do you own or h	ave any legal or equitabl	e interest in any residence, b	ouilding, land, or similar property?	
No. Go to Part	2.			
☐ Yes. Where is	the property?			
Part 2: Describe	Your Vehicles			
Do you own loos	o or boyo lovel or or			
someone else driv	es. If you lease a vehic	le, also report it on <i>Schedu</i>	nicles, whether they are registered or not? In the G: Executory Contracts and Unexpired Leas	nclude any vehicles you own that ses.
3. Cars, vans, tru	ıcks, tractors, sport u	tility vehicles, motorcycle	es ·	
<b>■</b> No				
☐ Yes				
<ol> <li>Watercraft, air Examples: Boat</li> </ol>	<b>craft, motor homes, A</b> s, trailers, motors, pers	TVs and other recreation onal watercraft, fishing ves	al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories	•
			erie, erie minesilee, metaloy die dedeasones	
■ No □ Yes				
_ 100				
<b>.</b>				
pages you ha	r value of the portion ve attached for Part 2	you own for all of your en . Write that number here	tries from Part 2, including any entries for	.=> \$0.00
	our Personal and Hous	ehold Items able interest in any of the	o following items?	Comment
<b>,</b>	are any regards equal	and interest in dry or the	Tollowing Rems !	Current value of the portion you own?
C. Hawaahald wa	, and a soul formulation or			Do not deduct secured claims or exemptions.
Examples: Maj	ods and furnishings or appliances, furniture	, linens, china, kitchenware	•	·
□ No ■ Yes. Descri	lha			
— 165. Descri				
	Furniture			\$500.00
7 51	<del></del>			
7. Electronics Examples: Tele	evisions and radios; au	dio, video, stereo, and digit	al equipment; computers, printers, scanners; r	nusic collections; electronic devices
incl □ No	uding cell phones, carr	ieras, media players, game	s	2. South and the devices
Yes. Descri	be			

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Trasha M F	airly		Case number (if known)	19-50788
		Electronics			\$1,000.00
<i>Exam</i> ■ No	etibles of value ples: Antiques an other collect s. Describe	d figurines; paintings, pr tions, memorabilia, colle	rints, or other artwork; books, pictu ectibles	res, or other art objects; stamp, coin	, or baseball card collections;
9. <b>Equip</b> i Exam <sub>l</sub>	ment for sports a ples: Sports, phot musical inst	ographic, exercise, and	other hobby equipment; bicycles,	pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No □ Yes	s. Describe		•		
■ No		əs, shotguns, ammunitio	on, and related equipment		
□ No		lothes, furs, leather coat	ts, designer wear, shoes, accesso	ries	
		Clothing			\$1,000.00
■ No	Iry nples: Everyday je s. Describe	weiry, costume jeweiry,	, engagement rings, wedding rings	s, heirloom jewelry, watches, gems, ç	gold, silver
Exan ■ No	farm animals nples: Dogs, cats, s. Describe	birds, horses		~	
■ No	other personal ar		ou did not already list, including	any health aids you did not list	
15. Add for F	the dollar value Part 3. Write that	of all of your entries fr number here	rom Part 3, including any entrie	s for pages you have attached	\$2,500.00
	escribe Your Finar				
Do you o	own or have any	egal or equitable inter	rest in any of the following?	·	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No			rour home, in a safe deposit box, ε	and on hand when you file your petiti	on
17. <b>Depos</b> Exam	sits of money oples: Checking, s	avings, or other financia		shares in credit unions, brokerage st each.	houses, and other similar

Official Form 106A/B

Schedule A/B: Property

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De	ebtor 1	Trasha M Fa	irly		Case nu	umber (if known) _19-50788
			17.1.	Checking	Gulf Trust	\$0.00
18.	Bonds, Examp	, mutual funds, bles: Bond funds,	or public investme	cly traded stocks ent accounts with br	okerage firms, money market accounts	
				Institution or issuer	name:	
19.	Non-pu joint v	ıblicly traded st enture	ock and	interests in incorp	oorated and unincorporated businesses, inclu	ding an interest in an LLC, partnership, and
	☐ Yes.	Give specific inf		about them ne of entity:		wnership:
20.	Negotia	able instruments	include p	ersonal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money ord ansfer to someone by signing or delivering them.	ers.
	☐ Yes. (	Give specific info		about them uer name:		
	Retirem Examp	nent or pension les: Interests in I	account RA, ERIS	: <b>s</b> SA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension o	or profit-sharing plans
		List each accour		ely. of account:	Institution name:	
	Your st Examp	y deposits and nare of all unuse les: Agreements	d deposit	s vou have made so	o that you may continue service or use from a co public utilities (electric, gas, water), telecommun	mpany ications companies, or others
	■ No □ vec			•	Institution name or individual:	
				dia managanta fussa.		
	■ No	es (A contract ic	n a penoc	aic payment or mone	ey to you, either for life or for a number of years)	•
	☐ Yes	ls	suer nam	e and description.		
	Interests 26 U.S.C	<b>s in an educatio</b> C. §§ 530(b)(1), {	on IRA, ir 529A(b), a	n <b>an account in a q</b> and 529(b)(1).	ualified ABLE program, or under a qualified s	state tuition program.
	☐ Yes	Ins	stitution n	ame and description	n. Separately file the records of any interests.11	U.S.C. § 521(c):
	■ No	equitable or fut Give specific info			other than anything listed in line 1), and rights	or powers exercisable for your benefit
	Patents	, copyrights, tr	ademark	s, trade secrets, ar	nd other intellectual property	
	■ No	Give specific info			eds from royalties and licensing agreements	
	License Examp	es, franchises, a les: Building peri	and other mits, excl	r <b>general intangible</b> usive licenses, coop	es perative association holdings, liquor licenses, pro	ofessional licenses
		Give specific infe	ormation	about them		
Mo	ney or p	property owed t	o you?			Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

Schedule A/B: Property

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Debto	or 1 Trasha M Fairly		Case number (if known)	19-50788
	Yes. Give specific information about	them, including whether you already f	iled the returns and the tax years	
	·	Potential Tax Refund	Federal	\$0.00
		Potential Tax Refund	State	\$0.00
		Potential Tax Refund	EIC	\$0.00
E		ony, spousal support, child support, m	naintenance, divorce settlement, propert	y settlement
E	benefits; unpaid loans you	surance payments, disability benefits, made to someone else	sick pay, vacation pay, workers' compe	ensation, Social Security .
<i>E.</i>			); credit, homeowner's, or renter's insura	ance
	Company		Beneficiary:	Surrender or refund value:
If so	ny interest in property that is due y you are the beneficiary of a living tru omeone has died. No	ou from someone who has died st, expect proceeds from a life insurar	nce policy, or are currently entitled to red	ceive property because
	Yes: Give specific information		•	
<i>E.</i>	xamples: Accidents, employment dis	r or not you have filed a lawsuit or soutes, insurance claims, or rights to so	made a demand for payment ue	
	ther contingent and unliquidated c No Yes. Describe each claim	laims of every nature, including co	unterclaims of the debtor and rights t	o set off claims
	ny financial assets you did not alre No Yes. Give specific information	ady list		
36. <i>A</i> f	Add the dollar value of all of your e or Part 4. Write that number here	ntries from Part 4, including any er	ntries for pages you have attached	\$0.00
Part 5:	: Describe Any Business-Related Prop	erty You Own or Have an Interest In. Lis	st any real estate in Part 1.	
37 Do	you own or have any logal or oggitable	interest in any business-related proper	4.2	

No. Go to Part 6.

Official Form 106A/B

Schedule A/B: Property

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Debto	or 1 Trasha M Fairly		Case number (if known)	19-50788
ΠY	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
_	o you own or have any legal or equitable interest in any farm- o ■ No. Go to Part 7.	or commercial fishir	ng-related property?	
Г	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
E. ■	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate, line 2			\$0.00
56. <b>F</b>	Part 2: Total vehicles, line 5	\$0.00		
	Part 3: Total personal and household items, line 15	\$2,500.00		
58. <b>F</b>	Part 4: Total financial assets, line 36	\$0.00		
59. <b>F</b>	Part 5: Total business-related property, line 45	\$0.00		
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>F</b>	Part 7: Total other property not listed, line 54 +	\$0.00		
62. <b>T</b>	Total personal property. Add lines 56 through 61	\$2,500.00	Copy personal property to	stal <b>\$2,500.00</b>
63. <b>1</b>	Fotal of all property on Schedule A/B. Add line 55 + line 62			\$2 500 00

Fill in this infor	mation to identify your	case:		
Debtor 1	Trasha M Fairly			
	First Name	Mlddle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number	19-50788			
(if known)	10 00100			☐ Check if this is an amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pā	It 1: Identify the Property You Claim as	Exempt		•	
1.	Which set of exemptions are you claiming	g? Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonba	inkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/A	B that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ock only one box for each exemption.	
	Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a)
	Line IIoni Scriedule A/B. C. I			100% of fair market value, up to any applicable statutory limit	
	Electronics Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	Miss. Code Ann. § 85-3-1(a)
	Line Holl Schedule A/B. 1.1	-		100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Miss. Code Ann. § 85-3-1(a)
	Line non ourequie A/B. 11.1	-		100% of fair market value, up to any applicable statutory limit	
	Federal: Potential Tax Refund Line from Schedule A/B: 28.1	\$0.00		\$5,000.00	Miss. Code Ann. § 85-3-1(j)
	Line from Schedule AVE. 20.1			100% of fair market value, up to any applicable statutory limit	
	State: Potential Tax Refund Line from Schedule A/B: 28.2	\$0.00		\$5,000.00	Miss. Code Ann. § 85-3-1(k)
		-		100% of fair market value, up to any applicable statutory limit	

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De	ebtor 1 Trasha M Fairly			Case number (if known)	19-50788
	Brief description of the property and Schedule A/B that lists this property		Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	EIC: Potential Tax Refund Line from Schedule A/B: 28.3	\$0.00		\$5,000.00	Miss. Code Ann. § 85-3-1(i)
	and non-consult / vs. act			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead e (Subject to adjustment on 4/01/22  No			led on or after the date of adjustmen	it.)
	_	perty covered by the exemption wi	thin 1	,215 days before you filed this case?	?

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Fill in this inform	nation to identify your	case:		
Debtor 1	Trasha M Fairly			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number	19-50788			
(if known)				☐ Check if this amended fil

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Fill in th	is information to identify your				ĺ	
		case:				
Debtor 1	Trasha M Fairly First Name	Middle Name	Last Name			
Debtor 2		Middle Name	Last Name			
(Spouse if,		Middle Name	Last Name			
United S	tates Bankruptcy Court for the:	SOUTHERN DIS	STRICT OF MISSISSIPPI			
Case nui	mber 19-50788					
(if known)	19-30/00					Check if this is an
			i			amended filing
Off: -!-	L E 400E/E				1	<b>3</b>
	I Form 106E/F	** ** **				
	Iule E/F: Creditors W					12/15
Schedule Schedule left. Attach name and	tory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec n the Continuation Page to this pag case number (if known).  List All of Your PRIORITY Un	oired Leases (Officia cured by Property. If ge. If you have no int	l Form 106G). Do not include more space is needed, copy	any creditors with partially s	ecured clair	ns that are listed in
	ny creditors have priority unsecure					
	o. Go to Part 2.	a olalilis against yo	u i			
— 1√6						
	s. List All of Your NONPRIORIT	V Unsecured Clai	ime			ν.
	ny creditors have nonpriority unsec	·				
	•	J	•	, ,		
	o. You have nothing to report in this p	art. Submit this form	to the court with your other sch	edules.		
<b>■</b> Ye	98.					
unsec	Il of your nonpriority unsecured cl sured claim, list the creditor separately one creditor holds a particular claim, li c.	v for each claim. For e	each claim listed, identify what	type of claim it is. Do not list cla	aims already	included in Part 1. If more
						Total claim
	Ad Astra Recovery Serv Nonpriority Creditor's Name	Last	4 digits of account number	0967		\$589.00
	7330 W 33rd Street			Opened 04/17 Last	Active	
	North	Whe	n was the debt incurred?	12/14/18		
	Vichita, KS 67205  Number Street City State Zip Code	Δε.σ	of the date you file the claim	in. Charle all that annie		
	Who incurred the debt? Check one.	ASC	of the date you file, the claim	is. Check all that apply		
ı	Debtor 1 only	П	Contingent			
ī	Debtor 2 only		Jnllquidated			
	Debtor 1 and Debtor 2 only		Disputed			
_	☐ At least one of the debtors and and		of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a com	o III ijo.	Student loans			
	lebt	illullity	Obligations arising out of a sepa	aration agreement or divorce th	nat vou did no	ot .
ŀ	s the claim subject to offset?	repo	rt as priority claims			.,
i	No	<b>□</b> c	Debts to pension or profit-sharir	ng plans, and other similar deb	ts	
]	☐ Yes		Other. Specify Speedy Ca	sh 148		

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Debtor	1 Trasha M Fairly	Case number (if known) 19-50788						
4.2	Casha Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$240.00					
	1625 US 90 Ste C Gautier, MS 39553	When was the debt incurred?						
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify check cashing						
4.3	Check Now Nonpriority Creditor's Name	Last 4 digits of account number	\$300.00					
	2809 Hwy 90 A Gautier, MS 39553	When was the debt incurred?						
•	Number Street City State Zip Code Who Incurred the debt? Check one.	et City State Zip Code  As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify check cashing						
4.4	Convergent Outsourcing Nonpriority Creditor's Name	Last 4 digits of account number	\$1,053.00					
	Po Box 9004 Renton, WA 98057	When was the debt incurred? Opened 11/18						
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community							
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	No .	Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify Sprint						

Debtor	1 Trasha M Fairly		Case number (if known)	19-50788				
4.5	Credit Acceptance Corp  Nonpriority Creditor's Name	Last 4 digits of account number	1286		\$11,501.00			
	Po Box 513 Southfield, MI 48037	When was the debt incurred?	Opened 07/17 Last 6/11/18	Active				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated		•				
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce t	that you did not				
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing		ots				
	Yes	Other. Specify balance aff	er repossession					
4.6	Diversified Consultant Nonpriority Creditor's Name	Last 4 digits of account number	5641	_	\$390.00			
	10550 Deerwood Park Blvd	When was the debt incurred?	Opened 02/19					
-	Jacksonville, FL 32256  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims						
	No	Debts to pension or profit-sharing	ng plans, and other similar del	ots				
	Yes	Other. Specify Att U-Verse	)					
4.7	Express Cash Nonpriority Creditor's Name	Last 4 digits of account number			\$300.00			
	2516 A Denny Avenue Pascagoula, MS 39567	When was the debt incurred?						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	-				
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims						
	No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify check cash						
		poonly						

Debto	T1 Trasha M Fairly		Case number (if known) 19-50788				
4.8	Navigator Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	0004	\$3,292.00			
	P. O. Box 1647 Pascagoula, MS 39568	When was the debt incurred?	Opened 03/11 Last Active 9/16/15				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
*	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify balance aft					
4.9	Singing River Hospital Nonpriority Creditor's Name	Last 4 digits of account number		Unknown			
	Pamela Byrd P. O. Box 540	When was the debt incurred?					
	Pascagoula, MS 39568	_					
	Number Street City State Zip Code	s: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent☐ Unliquidated					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify all account	S				
4.1	Southwest Credit Syste	Last 4 digits of account number	2503	\$522.00			
	Nonpriority Creditor's Name 4120 International Parkway	When was the debt incurred?	Opened 01/18				
	Carrollton, TX 75007  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Viasat					

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	r1 Trasha M Fairly	Case number (if known) 19-50788	
4.1	T& T Rents Inc.	Last 4 digits of account number	\$1,600.00
	Nonpriority Creditor's Name P. O. Box 746	When was the debt incurred?	
	Ocean Springs, MS 39566 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify unsecured loan	
4.1	Verizon Wireless	Last 4 digits of account number 0001	\$2,914.00
	Nonpriority Creditor's Name Po Box 650051	When was the debt incurred? Opened 10/12	
	Dallas, TX 75265  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пом	
	·	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify phone bill	
4.1	Westlake Financial Svc	Last 4 digits of account number 8277	\$7,110.00
3	Nonpriority Creditor's Name	- Last 4 digits of account flumber	Ψ7,110.00
	4751 Wilshire Bvld Los Angeles, CA 90010	When was the debt incurred? Opened 04/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify balance after repossession	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Trasha M Fairly		Case number (if known) 19-50788					
AT&T Uverse	Line <u>4.6</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims					
P. O. Box 536216 Atlanta, GA 30353							
7 Marita, 071 0000	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	_				
Southern Financial	Line <u>4.9</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
P. O. Box 15203 Hattiesburg, MS 39404		Part 2: Creditors with Nonpriority Unsecured Claims					
Traditional g, Inc Co to t	Last 4 digits of account number	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?					
Speedy Cash	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
9240 US 49 Gulfport, MS 39503		Part 2: Creditors with Nonpriority Unsecured Claims					
Camport, Mo 00000	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?	_				
Sprint	Line <u>4.4</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
6391 Sprint Pkwy Overland Park, KS 66251		Part 2: Creditors with Nonpriority Unsecured Claims					
O TO HAIR I AIR, INO UUZUI	Last 4 digits of account number	Last 4 digits of account number					
			_				

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
.*				-
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
6f	Student leans	€ <b>f</b>	•	Total Claim
oi.	Student loans	oi.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that			
Ū	you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	29,811.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	29,811.00
	6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i.	<ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  \$ 6c. \$ 6d. \$

Fill in th	nis information to identify your ca	ase:		
Debtor '	indona in rainy			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if,	_	Middle Name	Last Name	
United S	States Bankruptcy Court for the:	SOUTHERN DISTRICT OF MIS	SSISSIPPI	
Case nu	ımber 19-50788			
(if known)				☐ Check if this is an amended filing
Offici	al Form 106G			
	dule G: Executory	Contracts and U	nexpired Leases	12/15
informat addition	ion. If more space is needed, cop al pages, write your name and ca you have any executory contract	py the additional page, fill it οι ase number (if known).	ng together, both are equally respons it, number the entries, and attach it to	this page. On the top of any
			chedules. You have nothing else to repo	ort on this form.
■ \	Yes. Fill in all of the information belo	ow even if the contacts of leases	are listed on Schedule A/B:Property (O	fficial Form 106 A/B).
exa	separately each person or comp mple, rent, vehicle lease, cell pho unexpired leases.	pany with whom you have the one). See the instructions for this	contract or lease. Then state what eac s form in the instruction booklet for more	ch contract or lease is for (for examples of executory contracts
Pe	rson or company with whom you Name, Number, Street, City, S		State what the contract or lease is	s for
2.1	Progressive Leasing		\$331.00 mth	
	1069 S Jordon		to keep Balance \$1900.00	·
	Gateway Ste 100 South Jordan, UT 84095			·
2.2	Singing River A		to break lease	
	Apartments 3605 Gautier Vancleave		6 months left	

Gautier, MS 39553

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Fill in thi	s information to identify your	case:			
Debtor 1	Trasha M Fairly				
Dobtos 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fl	lling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case nun	nhor 40 50799				
(if known)	nber 19-50788				☐ Check if this is an
					amended filing
Officia	al Form 106H				
-		1 - 1 - 4			
sche	dule H: Your Cod	eptors			12/15
Arizo ■ No □ Ye	es  Ithin the last 8 years, have you na, California, Idaho, Louisiana b. Go to line 3. es. Did your spouse, former spo	, Nevada, New Mexico, Puuse, or legal equivalent live	erto Rico, Texas, Washi	ington, and Wisconsin.)	
in lin	e z again as a codebiol offly i	't that person is a quaran	tor or cosigner. Make :	sure you have listed the	ne creditor on Schedule D (Official
in lin Form	n 106D), Schedule E/F (Officia Column 2.	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make :	sure you have listed the	ne creditor on Schedule D (Official
in lin Form	n 106D), Schedule E/F (Officia	l Form 106E/F), or Sched	tor or cosigner. Make :	sure you have listed to 16G). Use Schedule D,	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
in lin Form	n 106D), Schedule E/F (Officia Column 2. Column 1: Your codebtor	l Form 106E/F), or Sched	tor or cosigner. Make :	sure you have listed the state of the state	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt as that apply:
in lin Form out C	n 106D), Schedule E/F (Officia Column 2. Column 1: Your codebtor	l Form 106E/F), or Sched	tor or cosigner. Make :	sure you have listed to 06G). Use Schedule D, Column 2: The cre	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt as that apply:
in lin Form out C	n 106D), Schedule E/F (Officia Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	l Form 106E/F), or Sched	tor or cosigner. Make :	sure you have listed the state of the state	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  eineine
in lin Form out C	Number Street	I Form 106E/F), or Sched	tor or cosigner. Make aule G (Official Form 10	sure you have listed the column 2: The cree Check all schedule D, lin Schedule E/F, l	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  eineine
in lin Form out C	n 106D), Schedule E/F (Officia Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Z	l Form 106E/F), or Sched	tor or cosigner. Make :	sure you have listed the column 2: The cree Check all schedule D, lin Schedule E/F, l	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  eine
in lin Form out C	n 106D), Schedule E/F (Officia Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Z  Name  Number Street	I Form 106E/F), or Sched	tor or cosigner. Make aule G (Official Form 10	sure you have listed the list of the list	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  e ine e
3.1	n 106D), Schedule E/F (Officia Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Z  Name  Number Street	I Form 106E/F), or Sched	tor or cosigner. Make aule G (Official Form 10	sure you have listed the column 2: The cree Check all schedule D, lin Schedule E/F, l	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  e ine e
In lin Form out C	Number Street City	I Form 106E/F), or Sched	tor or cosigner. Make aule G (Official Form 10	sure you have listed the list of the list	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  e ine e ine
3.1	Number Street City	I Form 106E/F), or Sched	tor or cosigner. Make aule G (Official Form 10	sure you have listed the column 2: The cree Check all schedule D, lin Schedule E/F, I Schedule G, lin Schedule B, lin	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:  e ine e ine

Fill	in this information to identify your ca	ase:							
	otor 1 Trasha M Fa								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF MISSISSIPPI						
	se number 19-50788 sown)		-			Check if this is:  An amended A supplement		g postpetition	chapter
$\bigcirc$	fficial Form 106l							ollowing date:	
	chedule I: Your Inc	omo				MM / DD/ YY	/YY		12/15
sup spo atta	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not fill or spouse is not filing w	ng jointly, and your s ith you, do not inclu	spouse i: de inforn	s living nation	with you, inclu about vour spo	de inforn use. If mo	nation about ore space is r	your needed.
Par			***************************************						
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Emplo	yed		
	information about additional employers.		☐ Not employed			☐ Not en	☐ Not employed		
	Include part-time, seasonal, or	Occupation	CNA						
	self-employed work.	Employer's name	Riverchase Villa	ge					
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here? 5 yrs						
Par	t 2: Give Details About Mor	nthly Income		_					
Esti spou	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for a	any line	e, write \$0 in the	space. Inc	clude your nor	n-filing
If yo	u or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co	ombine the information	n for all e	employe	ers for that persor	n on the li	nes below. If y	ou need
					F	or Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,815.24	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,815.24	\$	N/A	

Debto	r 1	Trasha M Fairly		Case r	number ( <i>if known</i> )	19-5	0788
				For	Debtor 1		Debtor 2 or -filing spouse
	Сор	by line 4 here	4.	\$	2,815.24	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	358.82	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	528.69	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	887.51	\$	N/A
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,927.73	\$	N/A
	<b>List</b> 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
	ΔI.	monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce					
	<b>.</b> .	settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e. 8f.	Social Security	8e.	\$	0.00	\$	N/A
	OI.	Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		,927.73 + \$	<u></u>	N/A = \$ 1,927.73
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ν		Ψ_		N/A = \$ 1,927.73
	Incluothe Othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		Schedule J. 11. +\$0.00
	<b>Add</b> Write appl	I the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain</i> lies	ult is th n <i>Liabi</i> i	e com lities a	bined monthly in nd Related <i>Data</i>	ncome. , if it	12. \$ 1,927.73
13.	Do۱	you expect an increase or decrease within the year after you file this form?	?				Combined monthly income
		No.	-				
		Yes. Explain:					

Fill	in this information to	identify your case:					
Deb	tor 1 Tra	sha M Fairly			Checl	k if this is:	
5.1					· ·	An amended filing	
	tor 2 ouse, if filing)					A supplement show 13 expenses as of t	ing postpetition chapter he following date:
Unite	ed States Bankruptcy	Court for the: SOUTI	HERN DISTRICT OF MISS	ISSIPPI	_	MM / DD / YYYY	
Case	e number 19-507	88					
(If kr	nown)				•		
Of	ficial Form	106J					
		Your Expe	1565	•			12/1
Be a	as complete and a ermation. If more s nber (if known). Ar	ccurate as possible pace is needed, att nswer every question	. If two married people ar ach another sheet to this	e filing together, bo form. On the top of	oth are equa any additio	ally responsible for nal pages, write y	r supplying correct
Pari	Describe Y Is this a joint cas	our Household					
,,	■ No. Go to line 2						
	_	tor 2 live in a sepa	rate household?				
	□ No □ Yes. De	ebtor 2 must file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.	
2.	Do you have dep			·			
	Do not list Debtor Debtor 2.	1 and ■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the			***************************************			□ No
	dependents name	S.		son		21 yrs	Yes
							□ No □ Yes
							□No
							☐ Yes
							□ No □ Yes
3.	Do your expense expenses of peop	ole other than	l <sub>No</sub> l Yes				_ 100
	yourself and you	r dependents?	1 165				
Par		our Ongoing Month	ly Expenses				
exp	imate your expens enses as of a date licable date.	es as of your bankr after the bankrupto	uptcy filing date unless y cy is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a sur J, check the	oplement in a Cha e box at the top of	pter 13 case to report the form and fill in the
Incl	ude expenses paid	for with non-cash	government assistance i	f you know	garanga Esta		
	value of such assi icial Form 106l.)	stance and have in	cluded it on <i>Schedule I:</i> )	our Income		Your expe	nses
4.		ne ownership exper	nses for your residence. I or lot.	nclude first mortgage	4. \$		650.00
	If not included in	line 4:					
	4a. Real estate	táxes			4a. \$		0.00
		meowner's, or rente	r's insurance		4a. \$		0.00
		enance, repair, and			4c. \$		0.00
-		's association or cor			4d. \$		0.00
5.	Additional mortg	age payments for y	<b>our residence,</b> such as ho	me equity loans	5. \$		0.00

6. Utilities: 6a. Electricity, hest, natural gas 6b. Water, sever, garbage collaction 6c. Telephone, call phone, Intornet, satellite, and cable services 6c. Sephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, Internet, satellite, and cable services 6c. Telephone, call phone, satellite, satellite, satellite, satellite, satellite, sat	Deb	tor 1 Trasha M Fairly	Case number (if known)	19-50788
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60. Other. Specify:  Food and housekeeping supplies  7. \$ 360.00  8. Childcare and children's education costs  8. \$ 0.00  9. Personal care products and services  10. \$ 0.00  10. Personal care products and services  11. \$ 0.00  11. \$ 0.00  12. Transportation. Include gas, maintenance, bus or train fare.  12. \$ 150.00  13. \$ 0.00  14. \$ 0.00  15. Hedicia and dental expenses  16. \$ 0.00  17. Childcare and child under the services of the service			6c. \$	
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17c. Other. Specify: Lease 17c. \$ 331.00   17d. Other. Specify:   17d. \$ 0.00   18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). \$ 0.00   19. Other payments you make to support others who do not live with you. \$ 0.00   19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. \$ 0.00   20b. Real estate baxes 20b. \$ 0.00   20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00   20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00   20d. Homeowner's association or condominium dues 20e. \$ 0.00   21. Other: Specify: 21. +\$ 0.00   22. Calculate your monthly expenses 22a, Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   22c. Add line 22a and 22b. The result is your monthly expenses. 1,911.00   23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,927.73   23b. Copy your monthly expenses from line 22c above. 23b\$ 1,911.00   23c. Subtract your monthly expenses from your monthly income. The result is your monthly not income. 23c. \$ 16.73   24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?			17b. \$	
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23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$ 1,927.73 23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$ 1,911.00  23c. \$ 1,911.00  24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.	22	Calculate your monthly not income		3,53,00
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The result is your monthly net income.  23c. \$ 16.73  24. Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		200. Copy your monthly expenses from fine 220 above.	23υ, <b>-</b> φ	1,911.00
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  No.		23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	16.73
	24.	For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?	er you file this form? your mortgage payment to incre	ease or decrease because of a

Fill in this information to identify your case:					
Debtor 1 Trasha M Fairly First Name Middle Name Last Name					
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name					
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI					
Case number 19-50788 (if known)	☐ Check if this is an amended filing				
Official Form 106Dec					
Declaration About an Individual Debtor's Schedules	12/15				
If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false star obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below	tement, concealing property, or 00, or imprisonment for up to 20				
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)					
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declarate that they are true and correct.  X  Trasha M Fairly Signature of Debtor 1  Date  Date	ion and				

9-11	N to the to Common	Contable Office				
		tion to identify you	case:			
De	ebtor 1	Trasha M Fairly First Name	Middle Name	Last Name		
	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
' '		ruptcy Court for the:	SOUTHERN DISTRICT O			
	nse number 19	-50788				heck if this is an
		<u></u>		1-111	a	mended filing
_		40-				
	fficial Forr					
			Affairs for Individ			4/19
Be info	as complete and ormation. If mo	d accurate as possi e space is needed,	ble. If two married people a attach a separate sheet to t	re filing together, both are his form. On the top of any	equally responsible for sup additional pages, write you	plying correct ir name and case
nur	mber (if known).	Answer every ques	stion.		, , , , , , ,	
Pa	rt 1: Give De	tails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your o	urrent marital statu	s?			
	☐ Married					
	Not marrie	ed				•
2.	During the las	t 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
		all of the places you li	ved in the last 3 years. Do no	t include where you live now		
	Debtor 1 Prio	r Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	2009 Gravel Gautier, MS		From-To:	☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
<b>3</b> . sta	tes and territories	s include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev nedule H: Your Codebtors (Of	/ada, New Mexico, Puerto Ri	ity property state or territor co, Texas, Washington and V	<b>y?</b> (Community property Visconsin.)
P	art 2 Explain	the Sources of You	r Income			
4.	Did you have Fill in the total	any income from en amount of income yo		ill businesses, including part-		ndar years?
	□ No					
		n the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		f current year until	■ Wages, commissions,	\$8,043.53	☐ Wages, commissions,	
th	e date you filed	for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1	rasha M Fairl	у		Case	e number (if known)	19-50788	
			tor 1		Debtor 2		·
			rces of income ck all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last cale January 1 t	endar year: o December 31		Vages, commissions, uses, tips	\$26,219.00	☐ Wages, com bonuses, tips	missions,	
			Operating a business		☐ Operating a	ousiness	
	ndar year befor o December 31	2047\	Vages, commissions, uses, tips	\$28,133.00	☐ Wages, com bonuses, tips	missions,	
			Operating a business		☐ Operating a	ousiness	
■ No	n source and the	ils. Deb Sou	,	tely. Do not include income the discossincome from each source (before deductions and	nat you listed in lin  Debtor 2  Sources of inc  Describe below	ome	Gross income (before deductions and exclusions)
Part 3: Li	st Certain Payr	nents You Made	Before You Filed for	exclusions) Bankruptcy			
. Are eith □ No.	Neither Deb	tor 1 nor Debtoi	ots primarily consume 2 has primarily consuments	ı <mark>mer debts.</mark> Consumer debt	s are defined in 11	U.S.C. § 10	01(8) as "incurred by ar
			u filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,825* or mo	re?	
		Go to line 7.	maditar ta vulcana vaccana	d a total of COOFt on more			No. total amount or
	!	paid that creditor not include paym	. Do not include paymer ents to an attorney for t	d a total of \$6,825* or more ints for domestic support oblig his bankruptcy case.	gations, such as ch	ild support	and alimony. Also, do
	* Subject to	adjustment on 4	01/22 and every 3 year	s after that for cases filed on	or after the date of	f adjustmen	t.
Yes			n have primarily consu u filed for bankruptcy, di	<mark>umer debts.</mark> d you pay any creditor a tota	l of \$600 or more?		
	□ No.	Go to line 7.					
	■ Yes	nclude payments	ereditor to whom you pa s for domestic support o ankruptcy case.	ld a total of \$600 or more and bligations, such as child sup	d the total amount port and alimony.	you paid tha Also, do not	at creditor. Do not include payments to a
Credito	or's Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for
Only r cred	eg mth paym	ents to sched		\$0.00	\$0.00		Card Repayment ers or vendors

Deb	btor 1 Trasha M Fairly		Cas	e number ( <i>if known</i> )	19-50788	·
						-
7.	Within 1 year before you filed for ba Insiders Include your relatives; any ge of which you are an officer, director, p a business you operate as a sole prop alimony.	neral partners; relatives of any ger erson in control, or owner of 20% o	neral partners; partne or more of their voting	erships of which you g securities; and ar	u are a general pa ny managing ager	artner; corporations
	<ul><li>No</li><li>☐ Yes. List all payments to an insid</li></ul>	er.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	s payment
8.	Within 1 year before you filed for bainsider? Include payments on debts guarantee		yments or transfer a	iny property on a	ccount of a debt	that benefited an
	■ No □ Yes. List all payments to an insid	er				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	
Par	rt 4: Identify Legal Actions, Repos	sessions, and Foreclosures				
9.	Within 1 year before you filed for bat List all such matters, including person modifications, and contract disputes.  No Yes. Fill in the details.	inkruptcy, were you a party in a al injury cases, small claims actior	ny lawsuit, court ac ns, divorces, collectio	tion, or administr n suits, paternity a	ative proceeding ctions, support or	? custody
	Case title Case number	Nature of the case	Court or agency		Status of the c	ase
10.	Within 1 year before you filed for ba Check all that apply and fill in the deta	nkruptcy, was any of your prop ils below.	erty repossessed, f	oreclosed, garnis	hed, attached, s	eized, or levied?
	<ul><li>□ No. Go to line 11.</li><li>■ Yes. Fill in the information below</li></ul>					
	Creditor Name and Address	Describe the Property		Date		Value of the
	•	Explain what happene	d		•	property
	Singing River Hospital		•	2019		\$285.00
	Pamela Byrd P. O. Box 540 Pascagoula, MS 39568	☐ Property was reposs☐ Property was foreclo				
		■ Property was garnish	ned.			
		☐ Property was attached	ed, seized or levied.			
11.	Within 90 days before you filed for accounts or refuse to make a paym ■ No □ Yes. Fill in the details.	bankruptcy, did any creditor, ind ent because you owed a debt?	cluding a bank or fir	nancial institution	, set off any amo	ounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for ba		erty in the possess	ion of an assigne	e for the benefit	of creditors, a
	■ No □ Yes					

De	Irasna W Fairly	Case number	(if known) 19-50788	
Pa	rt 5: List Certain Gifts and Contributio	ns		
13.	Within 2 years before you filed for bank  No	cruptcy, did you give any gifts with a total value of more	than \$600 per person	?
	☐ Yes. Fill in the details for each gift.		·	
	Gifts with a total value of more than \$6 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	d		
14.	Within 2 years before you filed for bank ■ No	cruptcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	•	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankr or gambling?	uptcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No ·			
	☐ Yes. Fill in the details.	•		
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Рa	rt 7: List Certain Payments or Transfe	re		
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your behalf pay		rty to anyone you
	□ No	•		
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Person Who Made the Payment, if Not	You	made	
	Gardner Law Firm PC 3012 Canty Street Pascagoula, MS 39567 debbie@gardnerlawfirmpc.com	Attorney Fees	4/19	\$665.00
17.	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer the	ruptcy, did you or anyone else acting on your behalf pay editors or to make payments to your creditors? at you listed on line 16.	or transfer any prope	erty to anyone who
	■ No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

ספע	Trasna w Fairty		Case II	umber (if known) 19-50/88	
	Within 2 years before you filed for bankrup transferred in the ordinary course of your include both outright transfers and transfers r include gifts and transfers that you have alread	business or financial affair made as security (such as th	rs?		
	■ No	ady noted on the otatoment			
	☐ Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and va property transferre	d pay	scribe any property or ments received or debts d in exchange	Date transfer was made
	Person's relationship to you		par	a in exchange	
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p	uptcy, did you transfer any protection devices.)	property to a self-set	tled trust or similar device	e of which you are a
	No			•	
	Yes. Fill in the details.	December of the second con-			<b>5. -</b> .
	Name of trust	Description and va	lue of the property tra	ansterred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, I	Instruments, Safe Deposit	Boxes, and Storage U	Inits	
20.	Within 1 year before you filed for bankrup sold, moved, or transferred?				
	Include checking, savings, money market, houses, pension funds, cooperatives, ass  No	, or other financial account ociations, and other financ	s; certificates of deposital institutions.	osit; shares in banks, cred	dit unions, brokerage
	☐ Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within a cash, or other valuables?	1 year before you filed for I	oankruptcy, any safe	deposit box or other depo	esitory for securities,
	■ No				
	☐ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		be the contents	Do you still have it?
22.	Have you stored property in a storage uni	t or place other than your l	nome within 1 year be	efore you filed for bankrup	otcy?
	■ No		•		
	Yes. Fill in the details.				
	Name of Storage Facility	Who else has or ha	ad access Descri	be the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Str State and ZIP Code)	eet, City,	•	have it?
Par	t 9: Identify Property You Hold or Contro	ol for Someone Else			
23.	Do you hold or control any property that s for someone.	someone else owns? Inclu	de any property you b	porrowed from, are storing	g for, or hold in trust
	■ No				
	Yes. Fill in the details.				
	Owner's Name	Where is the prope	erty? Descri	ibe the property	Value
	Address (Number, Street, City, State and ZIP Code)				
Par	rt 10: Give Details About Environmental In	nformation			
ror	the purpose of Part 10, the following defini	itions apply:			

■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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De	btor 1	Trasha M Fairly		Case number (if known)	19-50788	
_	regul	ations controlling the cleanup of these	· · · · · · · · · · · · · · · · · · ·			
	Site n	neans any location, facility, or propert n, opérate, or utilize it, including dispo	y as defined under any environmental l osal sites.	aw, whether you now	own, operate	e, or utilize it or used
	<i>Hazaı</i> hazar	rdous material means anything an env dous material, pollutant, contaminant	ironmental law defines as a hazardous , or similar term.	waste, hazardous sul	ostance, toxi	c substance,
Rep	ort all	notices, releases, and proceedings th	at you know about, regardless of when	they occurred.		
24.	Has a	nny governmental unit notified you tha	t you may be liable or potentially liable	under or in violation o	of an environ	mental law?
		No				
		es. Fill in the details.				
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental la know it	w, if you	Date of notice
25.	Have	you notified any governmental unit of	any release of hazardous material?			
	_	No Yes. Fill in the details.				
		e of site Tess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental la know it	ν, if you	Date of notice
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any envi	ronmental law? Includ	le settlement	s and orders.
		No				
	_ `	es. Fill in the details.				
		e Title • Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case		Status of the case
Da	# 11·	Give Details About Your Business or	,			
27.			cy, did you own a business or have an			ny business?
		,	n a trade, profession, or other activity,		-time	
	_	<u>_</u>	any (LLC) or limited liability partnershi	p (LLP)		
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	•			
	L	☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
	<b>III</b> N	No. None of the above applies. Go to F	Part 12.			
		es. Check all that apply above and fill	in the details below for each business			
	Busi Addr	ness Name ress	Describe the nature of the business	Employer Identi		ber ty number or ITIN.
	(Numb	er, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business		ty number of TTM.
20	\A/i+bi	2 years before you filed for however				
20.	institu	utions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your	business? In	clude all financial
		No /es. Fill in the details below.				
	Name Addr	e	Date Issued			
Pa	rt 12:	Sign Below				
l ha	ve read	the answers on this Statement of Fin	ancial Affairs and any attachments, an	d I declare under non	alty of porius	v that the anamer
				a . acciaio ailaci pell	ancy or perjui	y alacule aliSWefS

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
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Deptor 1	Trasha M Fairly	Case number (if known)	19-50788
are true an	d correct. I understand that making a false sta	tement, concealing property, or obtaining money or	property by fraud in connection
	kruptcy case can result in fines up to \$250,000		property by made in connection
18 U.Ş.C. §	§ 152, 1341, 1519, and 3571.		
Hai	sha Janley		
Trasha M	I Fairly U	Signature of Debtor 2	
Signature	of Debtor 1		
	4/20/19		
Date	) 100(11)	Date	
Did you att	ach additional pages to Your Statement of Fin	ancial Affairs for Individuals Filing for Bankruptcy (	Official Form 107)?
No No		, , ,	,
☐ Yes			
Did you pa	y or agree to pay someone who is not an attor	ney to help you fill out bankruptcy forms?	
No No			
🗆 Yes. Na	me of Person Attach the <i>Bankruptcy Petit</i>	ion Preparer's Notice, Declaration, and Signature (Offici	al Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	Trasha M Fairly		·	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	SOUTHERN DIST	RICT OF MISSISSIPPI	
		-		
Case number if known)	19-50788			· ☐ Check if this is an
				amended filing
Official Fo	orm 108			
Stateme:	nt of Intentio	n for Indiv	iduals Filing Under Chapt	ter 7
	lividual filing under cha		out this form if:	
_	ve claims secured by yo	• • •		
ou must file th	ever is earlier, unless th	vithin 30 davs after	ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to	set for the meeting of creditors, the creditors and lessors you list
two married p		r in a joint case, bot	th are equally responsible for supplying correct	information. Both debtors must
e as complete	and accurate as possib	ole. If more space is	needed, attach a separate sheet to this form. O	n the top of any additional pages.
write y	our name and case nur	mber (if known).	·	, , , , , , , , , , , , , , , , , , , ,
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
For any credit	tore that you listed in D	art 1 of Schodulo D	: Creditors Who Have Claims Secured by Prope	
information b	elow.		Creditors who have Claims Secured by Prope	rty (Official Form 106D), fill in the
	reditor and the property t	hat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
	en de vert de l'anne en en 1880 i fin en	e servici e er e e esta e se en en el el en en el el el en el el el el el e	and the second s	as exemption schedule or
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of	f		Retain the property and enter into a	☐ Yes
property	•		Reaffirmation Agreement.  ☐ Retain the property and [explain]:	
securing debt	:		Tretain the property and [explain].	<u> </u>
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	<b>□</b> 1/40
			Retain the property and enter into a	☐ Yes
Description of	f		Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt	t:			
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
			□ Retain the property and enter into a	☐ Yes
Description of	f		Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt	t:			
0 - 47 - 1				
Creditor's			☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

□ No

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Debtor 1	Trasha M	Fairly	Case number (if known)	19-50788
name: Descrip property securing	/		<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	☐ Yes
or any un	nexpired per rmation belo	ow. Do not list real estate leases. Un	in Schedule G: Executory Contracts and Unexpired expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended
Describe	your unexpi	red personal property leases		Will the lease be assumed?
Lessor's n	ame:	Progressive Leasing		□ No
				■ Yes
Description Property:	n of leased	\$331.00 mth to keep Balance \$1900.00		
Lessor's n	ame:	Singing River A		■ No
				☐ Yes
Description Property:	n of leased	to break lease 6 months left		
Part 3:	Sign Below			
Inder pen property th	alty of perju nat is subjec	ry, I declare that I have indicated my t to an unexpired lease.	intention about any property of my estate that sec	cures a debt and any personal
	tasho ha M Fairly ature of Debto	/ /	X Signature of Debtor 2	
Date	41	29119	Date	

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Mississippi

In re	Trasha M Fairly		Case No.	19-50788
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTOI	RNEY FOR DE	BTOR(S)
C	ursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,265.00
	Prior to the filing of this statement I have received		\$	665.00
	Balance Due			600.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	I have not agreed to share the above-disclosed comper	nsation with any other person	unless they are memb	pers and associates of my law firm
5. I a. b. c. d	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name of return for the above-disclosed fee, I have agreed to render a return for the above-disclosed fee, I have agreed to render a return for the above-disclosed fee, I have agreed to render a return for the above-disclosed fee, I have agreed to render a reparation and filing of any petition, schedules, states and representation of the debtor at the meeting of creditors are [Other provisions as needed]  Negotiations with secured creditors to recreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on house agreement with the debtor(s), the above-disclosed fee and Representation of the debtors in any disc	der legal service for all aspect and advice to the debtor in detent of affairs and plan which and confirmation hearing, ard duce to market value; exests as needed; preparation sehold goods.	compensation is attacts of the bankruptcy carry and be required; and any adjourned hear and filing of motion service:	ched.  ase, including:  ile a petition in bankruptcy;  rings thereof;  preparation and filing of ons pursuant to 11 USC
	any other adversary proceeding.			
T	certify that the foregoing is a complete statement of any	CERTIFICATION	normant to f-	management of the Color
this ba	nkruptcy proceeding. 4 29 19	James Clayton G Signature of Attorne Gardner Law Firr 3012 Canty Stree Pascagoula, MS: 2287626555 Fax debbie@gardner	ardner, Sr. 4747 y n PC t 39567 : 2287626589	presentation of the debtor(s) in